DECLARATION AND POWER OF ATTORNEY FOR UNITED STATES PATENT APPLICATION

Supple		Substitute				
inventor, WE hereby de	clare that:					
My residence, citizenship and post office address are given below under my name.						
		tter which is claimed and				
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nts through		(if applicable).				
		d specification, including				
ation(s) for patent or inv untry other than the Unit ion for patent or invento untry other than the Unit	rentor's certificate or of ted States identified below r's certificate or any PC ed States filed by me or	any PCT application(s) ow and also identify T application(s) on the same subject matter				
		Priority Claimed				
Number	Filing Date	Yes No				
	inventor, WE hereby de- tenship and post office a- riginal, first and joint invalue to the invention entitle HAIR AND SKIN PROTECTING Co- tereto. No. ats through d understand the content any amendment specific duty to disclose informa with Section 1.56 of Tit ign priority benefit unde- ation(s) for patent or invento untry other than the Unit ion for patent or invento untry other than the Unit fore that of the application	inventor, WE hereby declare that: tenship and post office address are given below riginal, first and joint inventor of the subject man ton the invention entitled: HAIR AND SKIN ALTERING AND PROTECTING COMPOSITIONS ereto. No. ats through d understand the contents of the above-identification and the subject man was with section 1.56 of Title 37 of the Code of Figure 119 of Title 3 atton(s) for patent or inventor's certificate or of untry other than the United States identified belien for patent or inventor's certificate or any PC untry other than the United States filed by me or fore that of the application(s) from which priority from the content of the application(s) from which priority fore that of the application(s) from which priority in the content of the application(s) from which priority from the content of the application(s) from which priority from the content of the application of the subject to the content of the application of the subject to the content of the application of the applic				

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I hereby claim benefit under Section 120 of Title 35 of the United States Code of any United States application(s) or PCT application(s) designating the United States identified below and, insofar as the subject matter of each of the claims of this application is not disclosed in said prior application(s) in the manner provided by the first paragraph of Section 112 of Title 35 of the United States Code, I acknowledge my duty to disclose material information of which I am aware as defined in Section 1.56(a) of Title 37 of the Code of Federal Regulations which occurred between the filling date of the prior application(s) and the national or PCT filing date of this application:

Filing Date

Application Serial No.

Full name of first joint inventor

Bethel, CT

USA

Inventor's signature

Residence Post Office Address

Citizenship

I hereby appoint:

validity of the application or any patent issued thereon.

William J. Davis, Reg. No. 30,744, Marilyn J. Maue, Reg 19,706 or either of them as my attorney or agent with full prosecute this application and to transact all business in the therewith.	power of substitution and revocation to	
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William J. Davis, Esq.	Fax No. (973) 628-3620	
I hereby declare that all statements made herein ar my own knowledge are true and that all statements made be true; and further that these statements were made with statements and the like so made are punishable by fine or	on information and belief are believed to the knowledge that willful false	

1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the

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